	Ellective October 1, 2003							10/516449					
		SMAI	LEI										
	TOTAL CLAI	MC	- (Cote	(Column 1)		lumn 2)	TYPE		=	OI	OTHER THAN SMALL ENTITY		
ı	TOTALCOA	1412					RA	ΓE	FEE		RATE		
	FOR	•.	NUME	NUMBER FILED		ABER EXTRA	BASIC	BASIC FEE		Oi	BASIC F	EE 950	
-	TOTAL CHARGEABLE CLAIMS		11	// minus 20=		:	xs	9=	<u> </u>	OF	X\$18:		
	INDEPENDEN	T CLAIMS	3	J minus 3 =			X43			٦٠,	` <del> </del>		
	MULTIPLE DEPENDENT CLAIM PRESENT									OF	X86=		
1	If the difference in column 1 is less than zero, enter "0" in column 2						+145	S=		OF	-290=		
1		TOTA	AL [		OF	TOTAL	950						
	CLAIMS AS AMENDED - PART (I (Column 1) (Column 2) (Column 3)							776	NTITY	OR		R THAN	
	CLAIMS			HIGHE			]		ADDI-	ם <b>ד</b>	SMALI		
		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT	RATI		TIONAL FEE	-	RATE	ADDI- TIONAL FEE	
	Total	· ))	Minus	- 20			XS 9	-	``	OR	XS18=		
	Independent	SENTATION OF A	Minus			=	X43=		1	OR	X86=		
-	FINST PHE		+145:	_		1	+290=	<del>  </del>					
								AL		OR	TOTAL	-	
		ADDIT. F	EL	_/_	JOR	ADDIT. FEE	V						
AMENDMENT B		(Column 1) CLAIMS REMAINING		(Columi HIGHE: NUMBE	ST	PRESENT EXTRA		TA	ADDI-	]	<del></del>	ADDI-	
		AFTER AMENDMENT	1	PREVIO	JSLY		RATE		ONAL FEE	니	RATE	TIONAL FEE	
	Total		Minus		-	= .	XS 9=	1	1 666	OR	X\$18=	FEE	
W	Inaependent	•	Minus	•••			X43=	+	·········		X86=	·	
Ľ	FIRST PRES	A-0-	╁		OR	X00=	·····						
										OR.	+290=		
		TOTA ADDIT. FE			OR ,	TOTAL DDIT. FEE							
_	7	(Column 1)	(00.00.00.00)					•				1	
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS	R SLY	PRESENT EXTRA	RATE	TIC	DDI- DNAL	ſ	RATE	ADDI- TIONAL	
NO NO	Total		Minus	PAID FOI			<del> </del>	F	EE	-		_FEE	
MEN	Independent		Minus	***			X\$ 9=			OR	X\$18=	•	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						X43=			OR _	X86=		
. ,		•					+145=			OR	+290=		
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  • If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  • TOTAL ADDIT. FEE  ADDIT. FEE  ADDIT. FEE													
• 1	The *Highest Num	ber Previously Paid	For (Total or	Independent)	is the h	3, enter "3." ighest number fo		propri	ate box				